

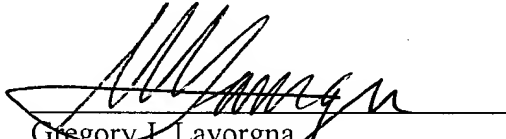
**Remarks**

In response to the Examiner's rejection of Claims 29 through 36, Applicant has cancelled these claims, without prejudice. Applicant intends to pursue the cancelled claims in a continuing application. Applicant also provides herein an Abstract as required by the Examiner.

It is respectfully submitted that all pending claims are in condition for allowance, and Applicant respectfully requests that allowance be granted at the earliest date possible. Should the Examiner have any questions or comments regarding Applicant's amendments or response, the Examiner is asked to contact Applicant's undersigned representative at (215) 988.2700.

If there are any fees due in connection with the filing of this response, please charge the fees to our Deposit Account No. 50-0573.

Respectfully submitted,



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